

# Application Form

## 2007 Water Efficiency Leader Awards

Please mail your application package to the following **postmarked no later than Friday, August 17, 2007**:

Bob Rose  
US Environmental Protection Agency  
1200 Pennsylvania Ave., NW  
Mail Code 4101M  
Washington, D.C. 20460

Please include within your application package the following:

1. Mandatory: This application form, completed and signed
2. Mandatory: A one page description (single sided) of the project being nominated
3. Optional: Up to two pages of supporting materials (two single pages or one double sided page)

**NOTE: The judging of nominated projects will be based upon the one page (single sided) description.** For example, if a claim is made of having reduced water consumption 20 percent you must state as such within the one page description. You may optionally submit up to two pages of supporting materials, data or a graph for example. This will allow applicants as well as judges to focus their effort on the single page description, yet allow applicants to submit supporting materials considered important.

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### I. Nominee Information

Name of award nominee: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name of contact (if nominee is an organization): \_\_\_\_\_

Address (if different from nominee): \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

## **II. Project Information**

Award Category (check one):

☐ Corporation ☐ Industry ☐ Individual ☐ Military

☐ NGO or other organization ☐ Local/State/Tribal/Federal Government

Title of project or activity: \_\_\_\_\_

Approximate start date of project (must be in the past 5 years): \_\_\_\_\_

Status of project (check one): ☐ Ongoing ☐ Completed

If completed, enter date of completion: \_\_\_\_\_

## **III. Nominator Information**

Name: \_\_\_\_\_

Organization/Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

## **IV. References**

Please identify two independent experts who can verify the accomplishment(s) of the person or organization being nominated for the award.

Name: \_\_\_\_\_

Organization/Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Organization/Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

END OF APPLICATION FORM